SUBMIT: COMPLETED APPLICATION, TAX
STATEMENT AND FEE TO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

CONSIN

Permit #: 19-0151 Pate: 6-4-19
Amount Paid: 25 2-11-19

1

Refund:

INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT

FILL OUT IN INK (NO PENCIL

TYPE OF PERMIT R			KLAND		NITARY	□ PRIVY [CONDIT	TIONAL	USE SPECIAL	USE	☐ B.O.A	. 🗆 (OTHER
Owner's Name: Norbert Olei Rilen Olei Address of Property:	0 10	110	chanlo	coleini	Mailing Address: City/State/Zip:						Telephone:		ne:
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					City/State/Zip:						Cell Phone:		
FR 44	17				Town of Port Wing						7	115-4	90-0892
Contractor:					Contractor Phone: Plumber:							Plumber	Phone:
UNICNOU	N							101	6				verior and an artista (5.2
Authorized Agent: (P		ing Applies	ation on behalf	of Owner(s))	Agent	Phone:			iress (include City/State,	/7in):		Written	Authorization
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												□ Yes	
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(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit

<u>Attach</u>

Date

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

box below: Draw or Sketch your Property (regardless of what you are applying for) Fill Out in Ink - NO PENCIL Show Location of: **Proposed Construction** Show / Indicate: (2)North (N) on Plot Plan Show Location of (*): (3) (*) Driveway and (*) Frontage Road (Name Frontage Road) (4)Show: All Existing Structures on your Property (5) Show: (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) (6)Show any (*): (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (7) Show any (*): (*) Wetlands; or (*) Slopes over 20% see survey map

Please complete (1) - (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Measurement			Description	Measur	ement
153	Feet		Setback from the Lake (ordinary high-water mark)	NA	Feet
120'	Feet		Setback from the River, Stream, Creek	WA	Feet
			Setback from the Bank or Bluff	NA	Feet
33.3	Feet				
258'	Feet		Setback from Wetland	NA	Feet
628'	Feet		20% Slope Area on the property	☐ Yes	 ✓ No
677'	Feet		Elevation of Floodplain	NA	Feet
H/A	Feet		Setback to Well	NA	Feet
NA	Feet				
30'	Feet				
	153 120' 33.3' 258' 628' 677' H/A	753 Feet 720' Feet 33-3' Feet 258' Feet 628' Feet 677' Feet MA Feet	153 Feet	Feet Setback from the Lake (ordinary high-water mark) 120' Feet Setback from the River, Stream, Creek Setback from the Bank or Bluff 33-3' Feet 258' Feet Setback from Wetland 628' Feet 20% Slope Area on the property 677' Feet Elevation of Floodplain A/A Feet Setback to Well A/A Feet Feet Feet Setback to Well A/A Feet Feet Feet Feet Feet Feet A/A Feet Feet Feet Feet Feet Feet Feet A/A Feet Feet Feet Feet Feet Feet Feet A/A Feet Feet	Feet Setback from the Lake (ordinary high-water mark) 120' Feet Setback from the River, Stream, Creek W/A 33-3' Feet Setback from Wetland W/A 28' Feet Setback from Wetland W/A 628' Feet Setback from He property Yes 677' Feet Elevation of Floodplain W/A M/A Feet Setback to Well W/A M/A Feet Setback to Well W/A

other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

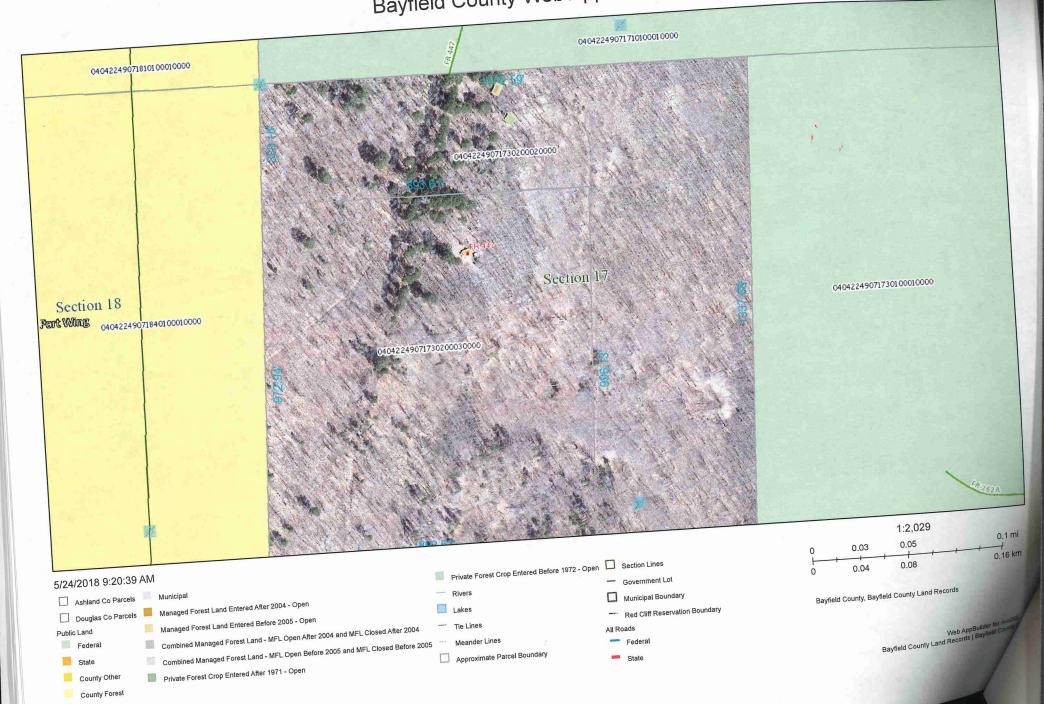
(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)	Sanitary Number:	8684 "	# of bedrooms:	Sanitary Date: 9	15/1989				
Permit Denied (Date):	Reason for Denial:								
Permit #: 19-0151	Permit Date: 6 - 9	4-19							
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Yes (Deed of Record Yes Yes	ous Lot(s)) No	Mitigation Required Mitigation Attached	☐ Yes 🍱 No ☐ Yes 🎉 No	Affidavit Required Affidavit Attached	¥Yes □ No FYes □ No				
Granted by Variance (B.O.A.) Yes □ No Case #: 18-04	Z	Previously Granted by ☐ Yes No		e#: NA					
Was Parcel Legally Created Was Proposed Building Site Delineated WYes □ No	Existing	Were Property Lines Represented by Owner Was Property Surveyed □ No □ No							
Inspection Record: Existing Entry Permitted Residue ce,	dade 4	Schreem on free is us! Zoning District (F1 Lakes Classification (-							
Date of Inspection: 7/24/18	Inspected by: Robe			Date of Re-Inspect	Date of Re-Inspection:				
Condition(s): Town, Committee or Board Conditions Attac	hed? 🗆 Yes 🗆 No – (If J	No they need to be atta	iched.)						
Per decision & Conditions of Board of Adjustment.									
Signature of Inspector:	(X			Date of Approv	ral: 2/12/19				
Hold For Sanitary: 🗆 Hold For TBA: 🗆	Hold For Affic	lavit: 🗆	Hold For Fees:						

Bayfield County Web AppBuilder





city, Village, State or Federal (ts May Also Be Required

SANITARY - X [Privy] (#8684-9/15/1989)
SIGN SPECIAL CONDITIONAL BOA - X (#18-04B) (Special Exception-8/30/2018)

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	19-0150			Issue	d To: No	rbert (Dleinik, Charl	es Ole	inik, A	Allen Olei	nik 8	& Andro	ew Bruso		
oart of the _ocation: in V. 964 P. 9			SW eds Of		Section	17	Township	49	N.	Range	7	W.	Town of	Port Wing	
Gov't Lot		L	.ot		Blo	ck	Suk	bdivisio	on				CSM#		

For: A Special Exception (13-1-22(j) from the terms of Section 13-1-60(a), Row 2, Column 3

Permit allows for an existing 1-Story with Attic/Loft Residence (16' x 20' = 320 sq. ft.); 18' in Height with an <u>after-the-fact</u> Bedroom Addition (8' x 12' = 96 sq. ft. <u>and</u> Deck Addition (8' x 10' = 80 sq. ft.) for an overall footprint of 496 sq. ft to remain a distance of 33.3' from the North property line.

You (the property owner) shall fulfill the conditions placed by the Board of Adjustment; your recorded affidavit; sanitary (if applicable) and/or any additional requirements placed by this Department. The Planning and Zoning Department requires verification/proof that all conditions have been met. Any future expansions or development would require additional permitting.

Condition(s): (1) The applicants must seek, with appropriate fees, and be issued an After the Fact Land Use Permit for the deviation in the residence as constructed versus the permit dimensions and a second permit for the wood shed on the property. (2) The applicants must submit in writing a document correcting their application (18-04). The errors identified in the application are deemed not material to this decision. (3) If further development of this site is undertaken, all residential structures must meet the seventy-five-foot set back requirement to the East, West and South. No sanitary systems or well is allowed to service the current residence. If desired, the residence must be moved or a new code compliant one constructed. Additionally, the applicants are allowed to increase the square footage of their residence to double its current size provided it does not violate the new Northern property line setback requirement. (4) Notice of the above requirements shall be recorded with the Bayfield County Register of Deeds office. You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources center (715) 685-2900.

NOTE: Changes in plans or specifications shall not be made without obtaining approval.

This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Board of Adjustment / Robert Schierman

Authorized Issuing Official(s)

June 4, 2019

Date

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT Permit #: ENTERED BAYFIELD COUNTY, WISCONSIN Date: Date Stamp (Received) Amount Paid: Refund:

INSTRUCTIONS: No perm Checks are made payable DO NOT START CONSTRU	to: Bayfield (ounty Zoning			eld Co. Zoning L	Dept.	40		TININK (NO I	PENCIL)	Art State of	
TYPE OF PERMIT REQ	UESTED-	LAN	D USE SA	NITAR	Y D PRIVY	CONDIT	IONAL USE	☐ SPECIAL	USE B.O	Α. Π	OTHER	
Owner's Name: Oler	nicheho	nles 0	leinic	Maili	ng Address:		City/State/			Telepho		
Address of Property:	11/1/1	WILL	proso	City/:	State/Zip:	-11 -	Knine	ianores, a	Cell Phone:			
FR 447	1					Por	+ Win	0\		90-0892		
Contractor:		***		_		Plumber:				Plumber		
owners						- /-	one					
Authorized Agent: (Perso	on Signing Appl	cation on beha	lf of Owner(s))	Agen	t Phone:	Agent Mail	ing Address (nclude City/State	·/Zip):	Written Attache Secondary		
PROJECT LOCATION	egal Descrip		ax Statement)	<u>Tax II</u>	04224407	17302		000	Recorded Doct	ument: (Sh	P 932	
1/4, Sh	<u>Mw</u> 1/4, <u>5</u> w 1/4									ubdivision:		
Section,	Township _	49 N, F	Range V	N	Port U	Juva	7		Lot Size	Acrea	age 20	
			n 300 feet of Riv of Floodplain?		eam (incl. Intermittent)	Distanc	e Structure	is from Shorelin	IS Pro	perty in ain Zone?	Are Wetlands Present?	
☐ Shoreland →	Is Propert	//Land withi	n 1000 feet of La		nd or Flowage escontinue	Distanc	e Structure	is from Shorelin	e:	Yes No	☐ Yes	
X Non-Shoreland												
Value at Time						# 0	f			DIE S	Type of	
of Completion * include	Proje	ct	# of Storie	ac.	Foundation	bedro			nat Type of Sanitary System		Water	
donated time &	rioje		# Of Storie		Todildation	in			the property?	n	on	
material						struct	14.65				property	
	New Cons		☐ 1-Story	l of	Basement			/lunicipal/City	Consider Town		☐ City	
\$ <u> </u>	Addition/ Conversio		☐ 1-Story + ☐ 2-Story	LOTT	Foundation	□ 2		New) Sanitary				
300	Relocate (////	× ROOF		AMORE			anitary (Exists rivy (Pit) or			A . O	
	Run a Bus		over woo		Use	₩ No		ortable (w/ser		0117		
	Property		□ Year Round □ Compost Toile									
N.	AFter t	hefact			Aspasonal			lone				
Existing Structure: (if permit bei	ng applied fo	or is relevant to it	t)	Length: 14		Wid	th: 20	H	eight: /	01	
Proposed Construct					Length:		Wid			eight:		
Proposed Use	1				Proposed Structu	ure			Dimensio	ons	Square Footage	
					ture on property)			(X)		
		Residenc	e (i.e. cabin, hu	unting	shack, etc.)				(X)		
K Residential Use		with Loft							(X)		
I Residential Ost		with a Porch with (2 nd) Porch							(X)		
				(X)							
			with a Deck with (2 nd) D						(X)		
☐ Commercial Us	se		with Attach		rage	*			(X)	v.	
		Bunkhou				s, or \square con	king & food	orep facilities)	(X)		
			Bunkhouse w/ (\square sanitary, or \square sleeping quarters, or \square cooking & food prep facilities) Mobile Home (manufactured date)									
			/Alteration (s)						(X)		
☐ Municipal Use	6 C				Roof our	rwoo	od Pil	R	(14 x 3	201	280	
		Accessory Building (specify) Roof Over wood Pile (14 Accessory Building Addition/Alteration (specify))		
		Special U	se: (explain)		(X)	,					
	Conditional Use: (explain) Other: (explain)								(X)		
I (we) declare that this applic (are) responsible for the deta result of Bayfield County rely property at any reasonable ti Owner(s): (If there are Multiple Authorized Agent:	il and accuracy of ying on this informe for the purpo Owners listed	FAILURE TO iny accompanying f all information mation I (we) am isse of inspection on the Deed	OBTAIN A PERMIT g information) has bee I (we) am (are) providi o (are) providing in or v	or STARen examiring and the with this a	TING CONSTRUCTION ned by me (us) and to the nat it will be relied upon by application. I (we) consent Older (s) of authorizat	WITHOUT A best of my (our y Bayfield Cour to county offi ction must ac	r) knowledge and nty in determinin cials charged wit company this	belief it is true, correg whether to issue a pn administering count application)	ct and complete. I (weermit. I (weermit.	accept liabilities access to the	ty which may be a e above described	
Address to send pern	(If you are si	gning on beha	alf of the owner(s)	a letter	of authorization mu	st accompa	ny this applica	ition)	A	<u>ttach</u> f Tax Stat		

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE the box below: Draw or Sketch your Property (regardless of what you are applying for) Fill Out in Ink - NO PENCIL Show Location of: **Proposed Construction** Show / Indicate: (2) North (N) on Plot Plan (3) Show Location of (*): (*) Driveway and (*) Frontage Road (Name Frontage Road) (4) Show: All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) (5)Show: Show any (*): (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (6)

(*) Wetlands; or (*) Slopes over 20%

See Survey map

Please complete (1) - (7) above (prior to continuing)

(7) Show any (*):

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measurement		Description	Measurement		
Setback from the Centerline of Platted Road	200 Fe	et	Setback from the Lake (ordinary high-water mark)	NA	Feet	
Setback from the Established Right-of-Way	167 Fe	et	Setback from the River, Stream, Creek	NA	Feet	
			Setback from the Bank or Bluff	NA	Feet	
Setback from the North Lot Line	106 Fe	et				
Setback from the South Lot Line	200 Fe	et	Setback from Wetland	NA	Feet	
Setback from the West Lot Line	(677 Fe	et	20% Slope Area on the property	☐ Yes	⋉ No	
Setback from the East Lot Line	635 Fe	et	Elevation of Floodplain	NA	Feet	
Setback to Septic Tank or Holding Tank	N/A) Fe	et	Setback to Well	NA	Feet	
Setback to Drain Field	N/A Fe	et				
Setback to Privy (Portable, Composting)	25' Fe	et				
Prior to the placement or construction of a structure within ten (10) feet	of the minimum required setb	ack, the	boundary line from which the setback must be measured must be visible from o	ne previously survey	yed corner to the	

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)	Sanitary Number:	8684	# of bedrooms:	Sanitary Date: 9 15 1989						
Permit Denied (Date):	Reason for Denial:									
Permit #: 19-0151	Permit Date: 6-4	4-19								
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming □ Yes (Deed of Record □ Yes (Fused/Contigu	ous Lot(s)) No	Mitigation Required Mitigation Attached	□ Yes No No No	Affidavit Required Affidavit Attached Yes No						
Granted by Variance (B.O.A.) ✓ Yes □ No Case #:	T PC	Previously Granted by Yes No	y Variance (B.O.A.) Case	# NA						
Was Parcel Legally Created Was Proposed Building Site Delineated Wes □ No	Existing	Were Property Lines Represented by Owner Was Property Surveyed Wes Yes								
Inspection Record: Zxisting wood	shed no per	mit on M		Zoning District (F\) Lakes Classification (—)						
Date of Inspection: 7 24 18	Inspected by:	about Do	chlerman	Date of Re-Inspection:						
Condition(s): Town, Committee or Board Conditions Attached? Oxyes No - (If No they need to be attached.) The decision of Board of Adjustment. Not to be used for human habitation.										
Signature of Inspector:				Date of Approval: 2 12 19						
Hold For Sanitary: Hold For TBA:	Hold For Affic	davit: 🗆	Hold For Fees:							



City, Village, State or Federal May Also Be Required

LAND USE - X SANITARY -SIGN -SPECIAL -CONDITIONAL -BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	19-0151 Issued T					To: Norbert, Charles, & Allen Oleinik & Andrew								uso	1.00
Part of Location:	NW	1/4	of	sw	1/4	Section	17	Township	49	N.	Range	7	W.	Town of	Port Wing
Gov't Lot			L	ot		Blo	ck	Sul	bdivisio	on				CSM#	

For: Residential Accessory Structure: [1- Story; Roof over wood pile (14' x 20') = 280 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Not to be used for human habitation. Permit required per decision of BOA.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Rob Schierman

Authorized Issuing Official

June 4, 2019

Date